

## COMMON CARRIER ANNUAL EMPLOYMENT REPORT

(Please read instructions before completing and for Notice regarding public burden.)

## SECTION 1 - General Information

## 1. Name and Mailing Address of Respondent

FARMERS MUTUAL TELEPHONE COOPERATIVE  
PO BOX 389  
SHELLSBURG IA 52332☐ Check here if this  
is a change of  
address.

## 2. Year Report Filed

2018

3. Reporting Period (Ending Date of Pay  
Period Covered by Report)

JANUARY 2018

4. Number of Full-Time Employees during Selected  
Reporting Period (check one):

- a.
- ☐
- Fewer than 16 (complete Sections I, IV, and V only)
- 
- b.
- ☒
- 16 or more (complete all sections)

## SECTION II - Full-Time Employees.

Job Categories		Number of Employees (Report employees in only one category)														Total Columns A - N
		Race/Ethnicity														
		Hispanic or Latino		Not-Hispanic or Latino												
				Male						Female						
		Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	
		A	B	C	D	E	F	G	H	I	J	K	L	M	N	
Executive/Senior Level Officials and Managers	1.1			1											1	
First/Mid-Level Officials and Managers	1.2			1					1						2	
Professionals	2			1					2						3	
Technicians	3			6											6	
Sales Workers	4														0	
Administrative Support Workers	5								5						5	
Craft Workers	6														0	
Operatives	7														0	
Laborers and Helpers	8														0	
Service Workers	9														0	
TOTAL	10	0	0	9	0	0	0	0	0	8	0	0	0	0	17	
PREVIOUS YEAR TOTAL	11	0	0	10	0	0	0	0	0	7	0	0	0	0	17	

**SECTION III - Part-Time Employees.**

Job Categories		Number of Employees (Report employees in only one category)														Total Columns A - N
		Race/Ethnicity														
		Hispanic or Latino		Not-Hispanic or Latino												
				Male						Female						
		Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	
		A	B	C	D	E	F	G	H	I	J	K	L	M	N	
Executive/Senior Level Officials and Managers	1.1														0	
First/Mid-Level Officials and Managers	1.2														0	
Professionals	2														0	
Technicians	3														0	
Sales Workers	4														0	
Administrative Support Workers	5								1						1	
Craft Workers	6														0	
Operatives	7														0	
Laborers and Helpers	8														0	
Service Workers	9														0	
TOTAL	10	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
PREVIOUS YEAR TOTAL	11	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

**SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.**



This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.



This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company.  
(Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition.)

**SECTION V - Certification**

I certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct.

Date	Typed or Printed Name of Person Signing <b>CURTIS ELDRED</b>	Signature 	Telephone No. <b>(319) 436-2224</b>
Title of Person Signing <b>GENERAL MANAGER</b>		WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	

FCC FORM 395 - COMMON CARRIER ANNUAL EMPLOYMENT REPORT  
AS OF JANUARY 2018

Employee ID	Employee Name	Employee Status	Employee Status	Job Title	Job Code	Job Category/Detail	1.1 Executive/ Sr Level Officials & Managers	1.2 First/ Mid-level Officials & Managers	2 Professional	3 Technicians	4 Sales Workers	5 Administrative Support Workers	6 Craft Workers	7 Operatives	8 Laborers & Helpers	9 Service Workers	TOTAL	Notes
40	CURTIS P ELDRED	Active	FULLTIME	GENERAL MANAGER	1.1	Executive/Sr Level Officials & Managers	X											
11	MITCHELL J. KUHN	Active	FULLTIME	PLANT MANAGER	1.2	First/Mid-level Officials & Managers		X										
44	PAMELA JO MARTENS	Active	FULLTIME	OFFICE MANAGER	1.2	First/Mid-level Officials & Managers		X										
30	JOYCE D CALVERT	Active	FULLTIME	OFFICE PERSONEL	2	Professional			X									
51	LAINIE C SCOTT	Active	FULLTIME	OFFICE PERSONEL	2	Professional			X									
36	CHAD M. LEFEVERE	Active	FULLTIME	IT	2	Professional			X									
5	MICHAEL A. VOGT	Active	FULLTIME	PLANT PERSONNEL	3	Technicians												
14	TODD A HEPKER	Active	FULLTIME	PLANT PERSONNEL	3	Technicians				X								
35	BEN W. ARBUCKLE	Active	FULLTIME	PLANT PERSONNEL	3	Technicians				X								
38	Joshua M. Robinson	Active	FULLTIME	PLANT PERSONNEL	3	Technicians				X								
41	BENJAMIN M LANSING	Active	FULLTIME	PLANT PERSONNEL	3	Technicians				X								
47	AUSTIN JOHN NARVESON	Active	FULLTIME	PLANT PERSONNEL	3	Technicians				X								
50	CODY A SOJKA	Active	FULLTIME	PLANT PERSONNEL	3	Technicians				X								
10	JUDY ANN ROBERTSON	Active	FULLTIME	OFFICE PERSONEL	5	Administrative Support Workers						X						
18	KELLY L ELLIOTT	Active	FULLTIME	OFFICE PERSONEL	5	Administrative Support Workers						X						
21	MARNIE D EDGERLY	Active	FULLTIME	OFFICE PERSONEL	5	Administrative Support Workers						X						
33	Cathy I Griffin	Active	FULLTIME	OFFICE PERSONEL	5	Administrative Support Workers						X						
48	JODY A TRAUT	Active	FULLTIME	OFFICE PERSONEL	5	Administrative Support Workers						X						
49	SYDNEY B ROBERTSON	Active	PARTTIME		5	Administrative Support Workers						X						
TOTAL							1	2	3	6	0	6	6	0	0	0	18	

Excluded as no hours during 12/31/2017-1/13/2018 payroll cycle